

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Wt	571	11/22/00
RESPONSE FORMALITY REVIEW	N1	825	7/11/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	05/11/01
2	05/11/01
3	05/11/01
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50	05/11/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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